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PTO/SB/01 (09-04)

Approved for use through 07/31/2006. OMB 0651-0032

Approved for use through 07/01/2006. GMB 0001-0002  
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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted With Initial Filing      OR       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	86941SLP
First Named Inventor	Scott Harrington COMPLETE IF KNOWN
Application Number	
Filing Date	
Art Unit	
Examiner Name	

**I hereby declare that:**

**Each inventor's residence, mailing address, and citizenship are as stated below next to their name.**

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

# Method and System for Computer Aided Detection (CAD)

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 09-24-2003 as United States Application Number or PCT International

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the filing date of the present application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  The address associated with Customer Number: \_\_\_\_\_ OR  Correspondence address below

Name

Susan L. Parulski and/or Pamela R. Crocker

Address

343 State Street

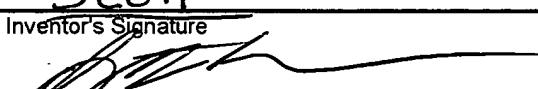
City Rochester	State New York	ZIP 14650-2201
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Country USA	Telephone (585) 477-4027	Fax (585) 477-4646
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Scott	Family Name or Surname Harrington
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Inventor's Signature 	Date 3/19/05
---	-----------------

Residence: City Etobicoke CA	State Providence Ontario	Country Canada	Citizenship USA
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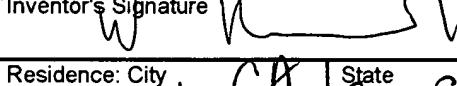
Mailing Address

26 Miles Road

City Etobicoke	State Ontario	Zip M8V 1V3	Country Canada
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NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Wido	Family Name or Surname Menhardt
--	------------------------------------

Inventor's Signature 	Date 2/8/2005
---	------------------

Residence: City Los Gatos CA	State California	Country USA	Citizenship Canada
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Mailing Address  
Eastman Kodak Company  
100 Century Center Court

City San Jose	State California	Zip 95112	Country USA
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Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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**DECLARATION****ADDITIONAL INVENTOR(S)**

Supplemental Sheet

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Daoxian Heidi		Zhang	
Inventor's Signature			Date 2/21/05
Residence: City	Los Gatos CA	State California	Country USA
People's Public Citizenship of China			
Eastman Kodak Company 100 Century Center Court			
Mailing Address			
City San Jose	California	Zip 95112	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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